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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the Patent Application of

Applicant: Berube et al.

Docket No.: P032

Ser. No.: 10/039,873

Examiner: Roane, Aaron

Filed on: January 3, 2002

Art Unit: 3739

For: FLEXIBLE DEVICE FOR ABLATION OF BIOLOGICAL TISSUE

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail to: Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450 on October 17, 2003.

Signed: 
Ross M. Carothers

AMENDMENT A

Hon. Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

This amendment, remarks and request for reconsideration is in response to the Office Action mailed on April 17, 2003 directed to the above-identified patent application. Please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 6 of this paper.

Amendments to the Drawings begin on page 15 of this paper and includes both an attached replacement sheet and an annotated sheet showing changes.

Remarks begin on page 17 of this paper.

An **Appendix** including amended drawing figures is attached.

373951

AMENDMENT TRANSMITTAL LETTER (Small Entity)

Applicant(s): Berube et al.

OCT 21 2003

Docket No.

P032

Serial No.
10/039,873Filing Date
01/03/02Examiner
Roane, ArronGroup Art Unit
3739

Invention: FLEXIBLE DEVICE FOR ABLATION OF BIOLOGICAL TISSUE

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.

A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
|--|-------------------------------------|-----------------------------|--------------------------------|-----------|-------------------|
| TOTAL CLAIMS | 52 - | 52 = | 0 | x \$9.00 | \$0.00 |
| INDEP. CLAIMS | 6 - | 6 = | 0 | x \$43.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |

No additional fee is required for amendment.

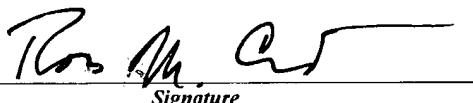
Please charge Deposit Account No. 50-1894 in the amount of

A check in the amount of to cover the filing fee is enclosed.

The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1894

Any additional filing fees required under 37 C.F.R. 1.16.

Any patent application processing fees under 37 CFR 1.17.



Signature

Dated: 17-oct-03

Reg No.:44,593

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Signature of Person Mailing Correspondence

Ross M. Carothers

Typed or Printed Name of Person Mailing Correspondence

CC: